

2021 Small Group Stand Alone Dental Plans

Small Group Dental- On Exchange	None	
Plan Type*		
Diagnostic & Preventive (D&P)		
Basic Services		
Major Services		
Medically Necessary Orthodontics		
Deductible		
Deductible applies to D&P		
Rates		

Small Group Dental- Off Exchange	Anthem-Family		Metropolitan Life
Plan Type*	High	Low	EHB Basic Low PPO
Diagnostic & Preventive (D&P)	100%	100%	90%
Basic Services	60%	50%	50%
Major Services	50%	30%	50%
Medically Necessary Orthodontics	50%	30%	50%
Deductible	\$50	\$50	\$100
Deductible applies to D&P	No	No	Yes
Rates	\$24.41	\$25.27	\$21.48

"High" plans have an Actuarial Value of 85% and "Low" plans have Actuarial Value of 70%.

All Pediatric plans have an Out of Pocket Maximum of \$350 a year for one child and it is capped at \$700 for two or more children.

The rates are for age 0-20 only and are for Area 1.

Rates may differ for family plans enrolling consumers over age 20 and may differ by the Area in which you live.

Coinsurance percentages are the amounts the plan pays.

Some plans have copays on specific services.